

Family Violence and Sexual Harm

Knowledge Translation & Exchange Report, August 2023

One in five Australian women have experienced sexual assault, and one in four have experienced abuse from a current or former partner.¹ Yet hidden within these national statistics are victim survivors who have experienced a range of sexually based harms within the context family violence from an intimate partner.

Understanding family violence and sexual harm

Sexual harm within a family violence context can include: rape, sexual assault, sexual harassment, image based abuse, control of sexual health or reproductive decision-making, and any other unwanted sexual behaviour. Victim survivors may comply with a partner's demands due to feelings of obligation or fear.

Intimate partner sexual violence is typically used to refer to rape, sexual assault and unwanted sexual acts from an intimate partner, which may or may not occur within a broader context of family violence in the relationship.

Family and domestic violence is defined within Victoria as including: any violent, threatening, coercive or controlling behaviour that occurs in current or past family, domestic, or intimate relationships.

In interviews conducted during our research² Victorian victim survivors of family violence further described the nature of sexual harm that they have experienced.

[There was] physical touching that was demanded, even though it didn't always lead to sex ... I hated it.

– Bell (VS6)

From the very beginning to the very end, sex was a power tool. It wasn't about pleasure; it wasn't about exploration or a sign of love or any of that; it was a power tool, a sense of entitlement.

– Alma (VS3)

I certainly was manipulated and guilted into it, doing things that I didn't want to ... its being guilted into looking a certain way, into acting a certain way, into doing certain things.

– Clarinda (VS7)

Victim survivors of family violence and sexual harm also described a range of challenges in their pathway through various elements of the Victorian crisis, support and legal systems.

In the following pages, the experiences of women experiencing sexual harm in family violence are represented through a diagrammatic pathway. Although the actual experiences are not necessarily linear, the representation allows agencies and practitioners to identify those steps along the pathway that involve their expertise and, at each of these stages, we offer reflections from the research on practice, supported by stories told by victim survivors or sector stakeholders.

Responding to Family Violence and Sexual Harm

Disclosure

Victim survivors may take time to self-identify or to disclose sexual harm that they've experienced within family violence. For some, sexual harm remains taboo and is difficult to talk about. For others, significant trauma associated with sexual harm may be overwhelming to confront while they are also facing immediate safety needs in response to family violence.

When victim survivors do disclose, effective responses reflect principles of trauma-informed practice such as building trust and rapport, believing victim survivors, allowing them to tell their story, and not judging or labelling their experience.

A lot of the other services that I needed, they just shut their doors

- Bell (VS6)

They made me feel so safe in those sessions and a genuine interest in wanting to know me, wanting to know what has happened.

- Henty (VS9)

Within the Victorian family violence and allied service sector, the Multi-Agency Risk Assessment and Management (MARAM) framework³ includes a question about forced sex - as this is a potential indicator of increased risk for lethal violence towards a current or former partner. Sexual harm in the context of family violence however can encompass many other experiences that are not captured within a MARAM assessment.

Risk Assessment

In addition to continued training to support family violence workers' administering of comprehensive risk assessments under MARAM; training and tools may be needed to support screening and referral to specialist services for sexual harm.

[There needs to be] more systemic training across family violence services about how to recognise sexual assault and how to ask the questions ... how to feel comfortable talking about sexual assault.

- Stakeholder (SH9)

When I conduct a MARAM and I ask a woman whether she's experienced sexual violence, I have to actually explain what that means and tell her that it means being coerced into sex when you don't want it, more often than you want it, and not just sex but sexual acts.

- Stakeholder (SH5)

Crisis Support

Sector responses to family violence encompass crisis support work with victim survivors to enhance their safety. These immediate crisis and support needs (such as financial, housing and legal support) are different from the longer-term therapeutic or counselling support that might be needed in the aftermath of sexual harm. Waitlists for such support are not currently meeting the needs of victim survivors.

Resources are urgently needed to reduce waitlists and increase capacity for specialist sexual violence counselling services and for longer-term psychological therapeutic support options for victim survivors of family violence.

There needs to be greater recognition in policy and service delivery models that crisis support in response to family violence is not a replacement for therapeutic or counselling support for sexual harm or vice versa. These are specialist skill sets, and while some workers may be trained to deliver both these support needs, they require adequate funding, case load management, and service periods, regardless of whether they are delivered in co-located or coordinated service models.

I think communication is really important, rather than guessing. So even if it was like we'll email you, you're on the list ... maybe an offer, 'how can we support you in the meantime?'

– Kallista (VS11)

Coordination and the communication of services is the biggest barrier to having effective services... For those cases involving family violence/sexual violence, cross-training model[s] would allow for holistic services to address both needs.

- Surveyed stakeholders

Some victim survivors of family violence will spend time in emergency housing services such as women's refuge or supported accommodation. Workers in these services note that it is in these times of safety and relative quiet, often after an escalated incident or period of crisis, that victim survivors may begin to process and disclose sexual harm.

Consideration should be given to workforce development within refuge and supported accommodation to identify and respond to victim survivors of sexual harm. Cooperative service arrangements between family violence accommodation and specialist sexual harm counselling support could be enhanced.

[At refuge] we don't want to open up something while they're still so raw and unsafe.

- Stakeholder (SH7)

[At refuge] they're becoming ready to be in a fairly safe space, to be able to do some processing ... to reduce some of the symptoms they are holding in their body.

- Stakeholder (SH1)

Few victim survivors report their experiences of sexual harm from an intimate partner to police. When they do, the responses of specialist Victoria Police members such as from the Sexual Offences and Child-abuse Investigation Team (SOCIT) were described by participants in this research as well suited to the needs of victim survivors. Overall, there is low confidence by family and sexual violence sector stakeholders in the capacity of police to take these harms seriously or to meet the needs of victim survivors.

Victoria Police responses to sexual harm in the context of family violence require greater training and practice guidance. These should focus on improving: communication between police and victim survivors; coordination police, family violence practitioners and other services; and victim-centred policing.

When it comes to the law you have to make it very black and white, and I think in a relationship with sexual assault, there is no black and white, it's your word against theirs.

- Lima (VS8)

If there has been a report made, it's fairly typical that police will not keep in touch. They won't let them [victim survivors] know when a perpetrator has been arrested, when their court dates are.

- Stakeholder (SH5)

Both victim survivors and stakeholders described the legal system as largely incapable of ensuring justice for sexual harm perpetrated by intimate partners. Evidentiary expectations create challenges for holding these perpetrators accountable and successful prosecution rarely occurs.

In family law, victim survivors frequently face the consequences of their abuse histories being overlooked. Parenting orders often compel interactions between victim and perpetrator which are retraumatising.

There is a need for greater awareness by police, mediators, judiciary and other legal professionals, of how legal processes and decisions can cause further trauma for victim survivors of family violence and sexual harm.

From my experience working with (community) legal services ... they are great, I believe they get quite a bit of training, but some of the private lawyers, it just feels like they are very rushed.

– Stakeholder (SH7)

Do I risk my personal safety, my sanity, or do I betray my kids? Because there is a court order that states I have to make them available and make all reasonable attempts to get them there. But what's reasonable? Because none of this is reasonable. I have to coparent with a man who raped me.

– Alma (VS3)

Victim survivors can vary in their experiences of long-term impacts in the aftermath of co-occurring family violence and sexual harm. Among potential long-term impacts are: mental health impacts (e.g. depression, anxiety and post-traumatic stress disorder); physical reactions to the trauma (e.g. eating and sleeping disorders as well as obsessive compulsiveness); and relationship difficulties (e.g. loss of social support and reluctance to enter new intimate or sexual relationships). Currently, Victorian family violence crisis support and sexual assault counselling support is limited to short-term client service periods.

Consideration should be given to development and resourcing of long-term therapeutic support provision for Victorian victim survivors of family violence and/or sexual harm for those who cannot afford private psychologists.

I needed to build myself up to be ready to face what's required to heal. And a lot of that I did on my own.

– Alma (VS3)

It took me time to open up ... so I completely healed from within. It's their [the counsellor's] support that has helped me change the trajectory of my life.

– Henty (VS9)

Finally, many sector stakeholders described current gaps in their knowledge and confidence to respond to co-occurring family violence and sexual harm. Approximately half of sector stakeholders surveyed were 'very confident' in: recognising the signs of family violence and sexual harm, responding to disclosures of sexual harm and referral options for victim survivors. Stakeholders were least confident about responding to perpetrators of sexual harm in the context of family violence.

Workforce development activity is required to improve service responses supporting the needs of victim survivors such as: inclusion of the intersections of family violence and sexual harm in formal education and qualifications; organisational in-service training opportunities on family violence and sexual harm; online webinars; tools and practice guides to further support cross-service referral and collaboration.

An Intersectional Approach to Family Violence and Sexual Harm

Both the *National Plan to End Violence Against Women and Children (2022 to 2032)*⁴ and the Victorian MARAM framework emphasise the importance of an intersectional approach in responding to, and preventing, family violence.

Intersectionality refers to the ways that multiple inequalities and discriminations experienced by a person can overlap and combine⁵ – impacting both their experiences (such as violence and abuse), as well as societal and institutional responses to them (such as access to appropriate support or justice). These inequalities and discrimination may occur on the basis of for instance: Aboriginality, racial or cultural identity, disability, gender, age, sexual orientation, and/or gender identity.⁶

Some victim survivors and stakeholders interviewed for the research spoke about the additional barriers or taboos that can impact support and justice responses to family violence and sexual harm.

So given my [cultural] background there has always been this cultural conditioning to believe that if there is family violence, the onus stays with the woman, that she would have done something to bring on her partner's wrath.

- Henty (VS9)

I think there is something about resourcing and developing family violence models that do collaborative, integrated care - but then I think there is a space and place for communities to define and respond to the issues that are most important to them.

- Stakeholder (SH11)

In the research project, sector stakeholders further identified particular knowledge and workforce capacity gaps to address the specific needs of victim survivors with a disability, Aboriginal and Torres Strait Islander victims, victim survivors from culturally and linguistically diverse communities, LGBTIQ+ victims, elderly victims, as well as children and young people impacted by co-occurring family and sexual violence.

There is a need to support workforce capability to respond to family violence and sexual harm as experienced by Victorians from diverse communities. This development should be supported by enhanced resourcing of, and collaboration with, specialist service providers.

Survivor Centred Practice in Relation to Family Violence and Sexual Harm

Family violence and sexual violence are often treated separately across the sector response, though there are some organisations within the sector that offer integrated services for victim survivors of both family violence and sexual assault. There will continue to be a need for specialist sexual assault services to provide therapeutic responses to sexual harm, not all of which intersects directly with family violence. Likewise, sexual harm will not always be disclosed or identified within family violence risk assessment and crisis support, though many practitioners acknowledge that sexual harm is often present within family violence contexts.

Though there are different expertise, capabilities and responsibilities for Victorian practitioners within family violence and sexual assault services, there are also many common elements to effective and survivor centred practice. More information can be found in both the Victorian Multi-Agency Risk Assessment and Management (MARAM) framework and the National Association of Services Against Sexual Violence (NASASV) *Standards of Practice Manual for Services Against Sexual Violence*.⁷

References

1. ABS (Australian Bureau of Statistics) (2023) [*Personal Safety, Australia 2021-2022 financial year*](#), ABS, accessed 11 May 2023.
2. Hamilton, G., Ridgway, A., Powell, A. & Heydon, G. (2023). *Family Violence and Sexual Harm: Research Report*. RMIT University.
3. State Government of Victoria (2022) [*MARAM Victim Survivor Practice Guides: Responsibility 7*](#), State Vic Gov website, accessed 11 May 2023.
4. Commonwealth of Australia (Department of Social Services) (2022)

[National Plan to End Violence against Women and Children 2022-2032](#), DSS, accessed 11 May 2023.

5. Crenshaw K (1991) 'Mapping the Margins: Intersectionality, Identity Politics, and Violence against Women of Color', *Stanford Law Review*, 43(6): 1241-1299, doi:10.2307/1229039

6. Victorian Government (2021) [Understanding Intersectionality](#), Victorian Government, accessed 11 May 2023.

7. NASASV (National Association of Services Against Sexual Violence) (2021) [Standards of Practice Manual for Services Against Sexual Violence 3rd edition](#), NASASV, accessed 11 May 2023.

Referral and support options

If you or someone you know is experiencing violence or abuse, you can contact 1800RESPECT on 1800 737 732 or through the online chat via the website: www.1800respect.org.au

For Victorian women and children who are victims of family violence, call Safe Steps on 1800 015 188 (24 hours a day, 7 days a week).

For Victorian victims of sexual assault call the Sexual Assault Crisis Line on 1800 806 292 (24 hours a day, 7 days a week).

In an emergency dial 000

Training and workforce development

Family Safety Victoria provide resources for practitioners with responsibilities under the family violence Multi-Agency Risk Assessment and Management (MARAM) framework: <https://www.vic.gov.au/maram-practice-guides-and-resources>

Sexual Assault Services Victoria, Safe & Equal and No To Violence offer webinars that explore coordinated service responses to sexual harm in the context of family violence. More information is available at: www.sasvic.org.au/for-members

RMIT University offers a *Graduate Certificate in Domestic & Family Violence* as well as tailored workforce development seminars. For more information contact the RMIT team directly.

More information about this research

This report summarises the practice implications of a larger research project into *Family Violence and Sexual Harm* funded by Family Safety Victoria. Pseudonyms have been used in this report to protect victim survivor confidentiality. These pseudonyms have been adopted from Victorian place names and do not represent any characteristics of participants. For the complete findings of this research please refer to the *Family Violence and Sexual Harm: Final Research Report* available by contacting the RMIT research team:

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